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From:

Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.
Account Number : 073222003555
Phone : (561) 686-3307
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New-JW2

LIMITED LIABILITY COMPANY

Palm Beach Cardiovascular Realty, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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**ARTICLES OF ORGANIZATION OF
PALM BEACH CARDIOVASCULAR REALTY, LLC**

The undersigned authorized representative of the Members, hereby forms and establishes a limited liability company pursuant to Chapter 608, Florida Statutes as follows:

ARTICLE I

The name of this limited liability company is PALM BEACH CARDIOVASCULAR REALTY, LLC.

ARTICLE II

This limited liability company shall have perpetual existence from the effective date of filing these Articles with the Department of State unless sooner terminated as provided in the Operating Agreement.

ARTICLE III

The mailing address and street address of the principal place of business of this limited liability company is 2503 Burns Road, Palm Beach Gardens, Florida. This limited liability company may, at its discretion, change the address of its principal place of business.

ARTICLE IV

The name and street address of the initial registered agent of this limited liability company is John White II, 1645 Palm Beach Lakes Blvd., Suite 1200, West Palm Beach, Florida 33401.

ARTICLE V

The management of this limited liability company shall be vested in the manager or managers and is, therefore, a manager-managed company.

ARTICLE VI

Additional members may be admitted to this limited liability company upon such terms and conditions as shall be established by the manager.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name this 6th day of May, 2004.



John White II, Authorized Representative of
the Members

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STATE OF FLORIDA)

H04000099960 3

COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 6th day of May, 2004, by John White II, who is personally known to me or who has produced Florida State Driver's License Number _____ as identification.

Executed this 6th day of May, 2004.



Mary Ann Patsko
MY COMMISSION # DD194186 EXPIRES
April 29, 2007
BONDED THROUGH RAIN INSURANCE, INC.

Mary Ann Patsko

Signature of Notary

Printed Name: MARY ANN PATSKO

My Commission Expires: APRIL 29, 2007

My Commission Number: DD194186

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**CERTIFICATE DESIGNATING REGISTERED
OFFICE FOR THE SERVICE OF PROCESS
WITHIN THIS STATE, NAMING AGENT
UPON WHOM PROCESS MAY BE SERVED**

Pursuant to Chapter 608.415 and Chapter 608.507 Florida Statutes, the following is submitted:

That PALM BEACH CARDIOVASCULAR REALTY, LLC, a Florida limited liability company, with its registered office at 1645 Palm Beach Lakes Blvd., Suite 1200, West Palm Beach, Florida 33401, has named John White II at such address as its initial registered agent to accept service of process within this State.

ACKNOWLEDGMENT:

Having been named registered agent to accept service of process for the above-stated limited liability company at the place designated in this Certificate, I hereby accept to act in such capacity and agree to comply with the applicable provisions of law.

By: John White II
John White II, Registered Agent

STATE OF FLORIDA)

COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 6th day of May, 2004, by John White II, who is personally known to me or who has produced Florida State Driver's License Number _____ as identification.

Executed this 6th day of May, 2004.



Mary Ann Patsko
MY COMMISSION # DD194186 EXPIRES
April 29, 2007
BONDED THRU TROY PAIR INSURANCE, INC.

Mary Ann Patsko
Signature of Notary

Printed Name: MARY ANN PATSKO

My Commission Expires: APRIL 29, 2007

My Commission Number: DD194186